Fill in this information to identify the case:	Filed 01/21/25 Fr	tored 01/21/25 18:20:29 3	Desc Main
Debtor 1 Nakia Henderson		_	
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Western Case number 19-24857-CMB	District of PA (State)	_	

Form 4100R

Response to Notice of Final Cure Payment

10/15

Part 1: Mortgage	Information	Trust Carer	. Twister for 5	IMIT Truck 2006 FF2 Manda		
ame of creditor:	Pass-Through Certificate			MLT Trust 2006-FF3, Mortgage	Court claim r	10 . (if known):
ast 4 digits of any	number you use to id	entify the debt	or's account	*****2591		
Property address:	540 Clawson St					
	Number Street			_		
	Pittsburgh	PA	15208	-		
	City	State	ZIP Code			
	n Default Payments	5				
Check one:						
✓ Creditor agrees to						
on the creditor's		paid in full the a	amount requi	red to cure the prepetition de	efault	
on the creditor's	claim.					
on the creditor's of Creditor disagree	claim. s that the debtor(s) ha claim. Creditor asserts	ve paid in full th	ne amount re	red to cure the prepetition de quired to cure the prepetition ount remaining unpaid as of	n default	\$
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Debtor 1	Nakia Henderson First Name Middle Name Last Name		Case	number (if known) 19-24857-CMB			
Part 4:	temized Payment History						
debtor(s) the credite bankrupto all pay all fee	ditor disagrees in Part 2 that the prepeti are not current with all postpetition pay or must attach an itemized payment his by filing through the date of this responsuments received; s, costs, escrow, and expenses assess ounts the creditor contends remain unp	ments, including all fe story disclosing the fol se: sed to the mortgage; a	ees, chai	rges, expenses, escrow, and costs,			
Part 5:	Sign Here						
The person completing this response must sign it. The response must be filed as a supplement to the creditor's proof of claim.							
Check the	Check the appropriate box::						
☐ I am th							
☑ I am th	e creditor's authorized agent.						
	I declare under penalty of perjury that the information provided in this response is true and correct to the best of my knowledge, information, and reasonable belief.						
Sign and print your name and your title, if any, and state your address and telephone number if different from the notice address listed on the proof of claim to which this response applies.							
•	× /s/ Wendy Lo	ocke	Date	01,21,2025			
Print	Wendy Locke First Name Middle Name	Last Name	Title	Agent for Creditor			
Company	Aldridge Pite, LLP						
If different from the notice address listed on the proof of claim to which this response applies:							
Address 3333 Camino del Rio South, Suite 225 Number Street							
	San Diego	CA 92108					
	City	State ZIP Code					
Contact phone	_{e (} 858 ₎ 750 _ 7600		Email	wlocke@aldridgepite.com			

Certificate of Service

I hereby certify that a copy of the foregoing Response to Notice of Final Cure Payment was served on the parties listed below by postage prepaid U.S. Mail, First Class or served electronically through the Court's ECF System at the e-mail address registered with the Court on

Date: <u>January 21, 2025</u>

Chapter 13 Trustee: Ronda J. Winnecour Trustee Address: Suite 3250, USX Tower 600 Grant Street

Pittsburgh, PA 15219

Trustee Email:

Debtor's Counsel Name: Albert G. Reese, Jr.

Debtor's Counsel Address: Law Office of Albert G. Reese, Jr.

640 Rodi Road 2nd Floor, Suite 2 Pittsburgh, PA 15235

Debtor's Counsel Email: areese8897@aol.com

Debtor 1 Name: Nakia Henderson
Debtor's Mailing Address: 540 Clawson Street
Pittsburgh, PA 15208

/s/ Cecilia Metcalf